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United States Bankruptcy Court Northern District of Illinois					Vol	untary Petition		
Name of Debtor (if individual, enter Last, First, Middle):  McLelland, Eric P.				Name of Joint Debtor (Spouse) (Last, First, Middle):  McLelland, Monica M.				
All Other Names used by the Debtor in the last 8 (include married, maiden, and trade names):	3 years				used by the J maiden, and			years
Last four digits of Soc. Sec. or Individual-Taxpa (if more than one, state all)	yer I.D. (ITIN)/Com	plete EIN	(if more	than one, state	all)	Individual-	Гахрауег I.I	D. (ITIN) No./Complete EIN
xxx-xx-5809 Street Address of Debtor (No. and Street, City, and State): 903 Colonade Road Shorewood, IL ZIP Code			Street 903	Address of Colonac Crewood	Joint Debtor	(No. and Str	reet, City, an	ZIP Code
County of Residence or of the Principal Place of Will		60404	Count		ence or of the	Principal Pla	ace of Busin	60404 ness:
Mailing Address of Debtor (if different from stre	eet address):				of Joint Debt	or (if differen	nt from stre	et address):
	Г	ZIP Code	4					ZIP Code
Location of Principal Assets of Business Debtor (if different from street address above):	<u> </u>							<u> </u>
Type of Debtor (Form of Organization) (Check one box)		of Business				of Bankrup Petition is Fi		Jnder Which one box)
Individual (includes Joint Debtors)   See Exhibit D on page 2 of this form.   Corporation (includes LLC and LLP)   Partnership   Other (If debtor is not one of the above entities, check this box and state type of entity below.)    Health Care Business   Single Asset Real Estate as de in 11 U.S.C. § 101 (51B)   Railroad   Stockbroker   Commodity Broker   Clearing Bank			defined	Chapt Chapt Chapt Chapt Chapt Chapt	er 7 er 9 er 11 er 12	☐ Cl of ☐ Cl of	hapter 15 Pe a Foreign M hapter 15 Pe a Foreign M	etition for Recognition Main Proceeding etition for Recognition Nonmain Proceeding
Chapter 15 Debtors Country of debtor's center of main interests:  Each country in which a foreign proceeding by, regarding, or against debtor is pending:	(Check box Debtor is a tax-ex	Exempt Entity  box, if applicable)  x-exempt organization  of of the United States  termal Revenue Code)  The Nature of Debts  (Check one box)  Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."			( one box)	Debts are primarily business debts.		
Filing Fee (Check one box  Full Filing Fee attached	)	Check o		nall business	-	ter 11 Debte		).
□ Full Filing Fee attached □ Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. □ Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B. □ A plan is being filed with this petition. □ Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). □ Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). □ Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). □ Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). □ Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). □ Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). □ Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). □ Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). □ Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). □ Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). □ Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). □ Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). □ Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). □ Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). □ Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). □ Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). □ Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). □ Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). □ Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). □ Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). □ Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D				owed to insiders or affiliates)  and every three years thereafter).				
Statistical/Administrative Information				with 11 U.S	S.C. § 1126(b).	THIS	SPACE IS F	OR COURT USE ONLY
☐ Debtor estimates that funds will be available ☐ Debtor estimates that, after any exempt properthere will be no funds available for distributions.	erty is excluded and	administrati		es paid,				
1- 50- 100- 200-	1,000- 5,001- 5,000 10,000	10,001- 25,000	25,001- 50,000	50,001- 100,000	OVER 100,000			
\$0 to \$50,001 to \$100,001 to \$500,001 \$50,000 \$100,000 \$500,000 to \$1	51,000,001 \$10,000,001 to \$50 million	\$50,000,001 to \$100	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion			
\$0 to \$50,001 to \$100,001 to \$500,001 \$50,000 \$100,000 \$500,000 to \$1	\$1,000,001 \$10,000,001 to \$50 million million		\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion				

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**B1** (Official Form 1)(04/13) Page 2 Name of Debtor(s): Voluntary Petition McLelland, Eric P. McLelland, Monica M. (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Case Number: Date Filed: Location Where Filed: Northern District/Eastern Division 12-11703 3/23/12 Date Filed: Location Case Number: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. X /s/ Bradley S. Covey March 31, 2015 Signature of Attorney for Debtor(s) (Date) Bradley S. Covey 6208786 Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ■ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

### B1 (Official Form 1)(04/13)

**Voluntary Petition** 

(This page must be completed and filed in every case)

Name of Debtor(s):

McLelland, Eric P. McLelland, Monica M.

#### Signatures

### Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

### X /s/ Eric P. McLelland

Signature of Debtor Eric P. McLelland

### X /s/ Monica M. McLelland

Signature of Joint Debtor Monica M. McLelland

Telephone Number (If not represented by attorney)

#### March 31, 2015

Date

### Signature of Attorney\*

### X /s/ Bradley S. Covey

Signature of Attorney for Debtor(s)

#### Bradley S. Covey 6208786

Printed Name of Attorney for Debtor(s)

### Law Offices of Bradley S. Covey, P.C.

Firm Name

232 S. Batavia Ave. Batavia, IL 60510

Address

### Email: bradley.covey@gmail.com

630-879-9559 Fax: 630-879-9394

Telephone Number

#### March 31, 2015

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

### $Signature\ of\ Debtor\ (Corporation/Partnership)$

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

#### Signature of a Foreign Representative

Page 3

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

<b>T</b> 7
Λ

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

### Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Date

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

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BI (Official Form 1)(04/13) Document	Page 4 of 65 Page 3
Voluntary Petition	Name of Debtor(s):  McLelland, Eric P.
(This page must be completed and filed in every case)	McLelland, Monica M.
	atures
Signature(s) of Debtor(s) (Individual/Joint)  I declare under penalty of perjury that the information provided in this petition is true and correct.  [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.  [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).  I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.  X  Signature of Debtor Eric P. McLelland	Signature of a Foreign Representative  1 declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.  (Check only one box.)  1 request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.  Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.  X  Signature of Foreign Representative  Printed Name of Foreign Representative
Signature of Joint Debtor Monica M. McLelland	
	Date
Telephone Number (If not represented by attorney)  3-26-15  Date  Signature of Attorney*  X  Signature of Attorney for Debtor(s)  Bradley S. Coyey £208786  Printed Name of Attorney for Debtor(s)  Law Offices of Bradley S. Covey, P.C.  Firm Name  232 S. Batavia Ave. Batavia, IL 60510	I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.  Printed Name and title, if any, of Bankruptcy Petition Preparer  Social-Security number (If the bankrutpcy petition preparer is not
Address  Email: bradley.covey@gmail.com 630-879-9559 Fax: 630-879-9394  Telephone Number	an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)
Date	Address
*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.	X
Signature of Debtor (Corporation/Partnership)	
I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.  The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.	Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.  Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:
<b>T</b>	

States Code, specified in this petition.				
Signature of Authorized Individual				
Printed Name of Authorized Individual				
Title of Authorized Individual				

Date

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

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B ID (Official Form 1, Exhibit D) (12/09) - Cont.	Page 2
☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable	
statement.] [Must be accompanied by a motion for determination by the court.]	
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or	,
mental deficiency so as to be incapable of realizing and making rational decisions with respect to	
financial responsibilities.);	
☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being	ng
unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephon	_
through the Internet.);	•, ••
☐ Active military duty in a military combat zone.	
☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseli requirement of 11 U.S.C. § 109(h) does not apply in this district.	ng
I certify under penalty of perjury that the information provided above is true and correct.	
Signature of Debtor:  Eric P. McLelland  Date: 5-24-17	
Eric P. McLelland	
Date: Security	

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B ID (Official Form 1, Exhibit D) (12/09) - Cont.	age 2
☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable	
statement.] [Must be accompanied by a motion for determination by the court.]	
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or	
mental deficiency so as to be incapable of realizing and making rational decisions with respect to	
financial responsibilities.);	
☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being	2
unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone,	-
through the Internet.);	
☐ Active military duty in a military combat zone.	
□ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.	3
I certify under penalty of perjury that the information provided above is true and correct.	
Signature of Debtor: Monica McSeller	

Date:

B6 Declaration (Official Form 6 - Declaration). (12/07)

### United States Bankruptcy Court Northern District of Illinois

În re	Eric P. McLelland Monica M. McLelland		Case No.	
		Debtor(s)	Chapter	7

### **DECLARATION CONCERNING DEBTOR'S SCHEDULES**

### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 24 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date _	3-24-15	Signature S.M.	
		Eric P. McLelland Debtor	
Date _	3-26-15	Signature Monica McSel	land
		Monica M. McLelland Joint Debtor	

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.

18 U.S.C. §§ 152 and 3571.

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B7 (Offici	izi Form 7) (04/13)	
9	24. Tax Consolidation Group.	
None M	If the debtor is a corporation, list the name and feder group for tax purposes of which the debtor has been of the case.	al taxpayer identification number of the parent corporation of any consolidated a member at any time within six years immediately preceding the commencement
NAME	OF PARENT CORPORATION	TAXPAYER IDENTIFICATION NUMBER (EIN)
	25. Pension Funds.	
None III	If the debtor is not an individual, list the name and fe employer, has been responsible for contributing at an	deral texpayor-identification number of any pension fund to which the debtor, as a y time within six years immediately proceding the commencement of the case.
NAME (	of Pension Fund	TAXPAYER IDENTIFICATION NUMBER (EIN)
		•••••
	<b>DECLARATION UNDER PENA</b>	LTY OF PERJURY BY INDIVIDUAL DEBTOR
I declare and that the	under penalty of perjury that I have read the answers co bey are true and correct.	ntained in the foregoing statement of financial affairs and any attachments thereto

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

Eric P. McLelland

Debtor

Joint Debter

Signature

Signature

Date 2-27-15

Date 3/27/15

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B8 (Form 8) (12/08)

### United States Bankruptcy Court Northern District of Illinois

Eric P. McLelland In re Monica M. McLelland			Case No.	
MOTICE W. MCEGNATO	11.	Debtor(s)	Chapter	7
CHAPTER 7 IN  PART A - Debts secured by property o property of the estate. Attach a	f the estate. (Part A n			
Property No. I	p-B	]		
Creditor's Name: Regional Acceptance Corp.		Describe Property So 2007 Hyundai Verac		: (99,000 miles)
Property will be (check one):  Surrendered	☐ Retained	1		
If retaining the property, I intend to (check	ŕ	oid lien using 11 U.S.C.	§ 522(f)).	
Property is (check one): ☐ Claimed as Exempt		■ Not claimed as exe	mpt	
PART B - Personal property subject to une Attach additional pages if necessary.)	xpired leases. (All three	e columns of Part B mu	st be complete	ed for each unexpired lease.
Property No. i	7			
Lessor's Name: -NONE-	Describe Leased Pr	operty:	Lease will be U.S.C. § 3650	Assumed pursuant to 11 (p)(2):
I declare under penalty of perjury that the personal property subject to an unexpire Date		intention as to any pro	operty of my	estate securing a debt and/or
Date 326-15	Signature	Monica M. McLelland	McSe	Dano

Joint Debtor

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B 201B (Form 201B) (12/09)

# **United States Bankruptcy Court**

		Northern Distr	ict of Illinois		
ln re	Eric P. McLelland Monica M. McLelland			Case No.	
		Del	otor(s)	Chapter	7
	CERTIFICATI UNDER	ION OF NOTICE ' § 342(b) OF THE	TO CONSUMEI BANKRUPTCY	R DEBTOR	R(S)
	I (We), the debtor(s), affirm that I (w	Certification ve) have received and re	of Debtor ad the attached notic	e, as required	by § 342(b) of the Bankruptcy
Code.					
	. McLelland a M. McLelland		( 9.m		9-20-15
	l Name(s) of Debtor(s)		Signature of Debto	or a N	Date
Case N	No. (if known)		Signature of Joint	Debtor (if any	$\frac{1}{2} \frac{1}{2} \frac{1}$

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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### United States Bankruptcy Court Northern District of Illinois

In re	Eric P. McLelland Monica M. McLelland		Case No.	
		Debtor(s)	Chapter 7	
	VER	IFICATION OF CREDITOR M	IATRIX	
		Number of	Creditors:	5
	The above-named Debtor(s) he (our) knowledge.	ereby verifies that the list of credi	tors is true and co	rrect to the best of my
Date:	3-74-17	Eric P. McLelland	2	
Date:	3-26-15	Signature of Debtor  Monica M. McLelland  Signature of Debtor	1 Sellas	Ø

gest Cose gouyntick
DSGe 5

Official Form 22A-1 Chapter 7 Statement of Your Current Monthly Income Solware Copyright (s) 1990-3014 Best Case, LLC - www bestcase com

	If you checked line 14b, fill out Form 22A-2 and file it with this form.
	If you checked line 14s, do NOT fill out or file Form 22A-2.
AVY DO / WM	MM/DD / JJJJ
SILUE	Date 03/27 / 2015
Signature of Deblor 2	Signature of Debtor 1
Monica M. McLelland	Eric P. McLelland
Day W John Daire	* Smo
on this statement and in any attachments is true and correct.	By signing here, I declare under penalty of perjury that the information
	woled ngis 151
2. AZS mosumeten of ebuse is determined by Form 22A-2.	14b. Line 12b is more than line 13. On the top of page 1, check box: Go to Part 3 and fill out Form 22A-2.
track box 1, There is no presumption of abuse.	14a. Line 12b is less than or equal to line 13. On the top of page 1, o
	Senagmos serile tines compane?
13. \$ 89,746.00	Fill in the median family income for your state and size of household.
	Fill in the number of people in your household.
1	Fill in the state in which you live.
ede:	Calculate the median family income that applies to you. Follow these ate
40.061,001 Z .ds1	1Zb. The result is your annual income for this part of the form
ZI X	Multiply by 12 (the number of months in a year)
	A-an a al adrama la sademira arith C2 ud ufalifitità
Copy line 11 hereas 12a, \$ 8,349,17	
Those of all act amond the coll upon	126. Copy your total current monthly income from line 11
	2. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11
	Calculate your current monthly income for the year. Follow these steps:
emozná	Calculate your current monthly income for the year. Follow these steps:
	. Calculate your current monthly income for the year. Follow these steps:
emozná	each column. Then add the total for Column A to the total for Column B.  Determine Whether the Means Test Applies to You  Calculate your current monthly income for the year. Follow these steps:
Total current months	each column. Then add the total for Column A to the total for Column B.  Determine Whether the Means Test Applies to You  Calculate your current monthly income for the year. Follow these steps:
T1.645,8 2 = T1.645,2 2 + 00.001,8 2	Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column B.  Determine Whether the Means Test Applies to You  Calculate your current monthly income for the year. Follow these steps:
00.00 \$ 00.00 \$ +  T1.845.17 \$ + 00.001,8 \$  Total current months of the second	10c. Total amounts from separate pages, if any.  Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.  Determine Whether the Means Test Applies to You  Calculate your current monthly income for the year. Follow these steps:
00.0 \$ £6.35\$ \$ 00.0 \$ 00.0 \$ + 00.00 \$ 00.0 \$ + 00.00 \$ + 00.00 \$ + 00.00 \$	10s. Short Term Disability 10c. Total amounts from separate pages, if any. 10c. Determine Whether the Means Test Applies to You 10c. Calculate your current monthly income for the year. Follow these steps:
10   10   10   10   10   10   10   10	Too not incuose any benefits received under the Social Security Act or payme received as a voicim of a wet crime, a crime against humanity, or internation focial on line 10c.  10a. Short Term Disability 10b.  10c. Total amounts from separate pages, if any.  1. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.  122. Determine Whether the Means Test Applies to You
	Determine Wheelts focus on the total security Act or payme to income from all other sources not listed above. Specify the source and income from all other sources not listed above. Specify the sources on the security, or intermetion domestic terroriem. If necessary, list other sources on a separate page and domestic terroriem. If necessary, list other sources on a separate page and 10c.  10c. Short Term Disability 10c. Total amounts from separate pages, if any.  10c. Total amounts from separate pages, if any.  each column. Then add the total for Column A to the total for Column B, each column. Then add the total for Column A to the total for Column B.
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00.0 \$ 00.00 \$ 00.00 \$ seaw for the first seam of the first seaw of the first seam o	For your spouse.  For your spouse.  For your spouse.  For your spouse.  Pension or retirement income. Do not include any amount received that y  Dension or retirement income. Do not include any amount received that y  Income from all other sources not listed above. Specify the source and  Do not include any benefits received under the Social Security Act or payme  received as a victim of a wer crime, a crime against humanity, or internation  fotal on line 10c.  10b.  10c. Short Term Disability  10c. Total amounts from separate pages, if any.  10c. Total amounts from separate pages, if any.
00.0 \$ 00.051 \$ serv  00.0 \$ 00.00 \$  innorms  innorms  and  into into into into into into into into	Do not enter the amount if you contend that the amount received was a ber the Social Security Act. Instead, list it here:  For your spouse.  For your spouse.  For your spouse.  Densiti under the Social Security Act.  Densiti under the Social Security Act.  To income from all other sources not listed above. Specify the source and not include any benefit received under the Social Security Act or payme to not include any benefits received under the Social Security Act or payme domestic terroriem. If necessery, list other sources on a separate page and 10c.  10c. Short Term Disability  10c. Total amounts from separate pages, if any.  10c. Total amounts from separate pages, if any.  each column. Then add the total for Column A to the total for Column B, each column. Then add the total for Column B to each column. Then add the total for Column B.
00.0 \$ 00.0 \$ 00.0  oo.0  oo.0  s eaw sine to let t	Do not enter the amount if you contend that the amount received was a ber the Social Security Act. Instead, list it here:  For your spouse.  For your spouse.  For your spouse.  Densiti under the Social Security Act.  Densiti under the Social Security Act.  To income from all other sources not listed above. Specify the source and not include any benefit received under the Social Security Act or payme to not include any benefits received under the Social Security Act or payme domestic terroriem. If necessery, list other sources on a separate page and 10c.  10c. Short Term Disability  10c. Total amounts from separate pages, if any.  10c. Total amounts from separate pages, if any.  each column. Then add the total for Column A to the total for Column B, each column. Then add the total for Column B to each column. Then add the total for Column B.
00.0 \$ 00.051 \$ serv  00.0 \$ 00.00 \$  innorms  innorms  and  into into into into into into into into	For your spouse.  For your spouse.  For your spouse.  For your spouse.  Pension or retirement income. Do not include any amount received that y  Dension or retirement income. Do not include any amount received that y  Income from all other sources not listed above. Specify the source and  Do not include any benefits received under the Social Security Act or payme  received as a victim of a wer crime, a crime against humanity, or internation  fotal on line 10c.  10b.  10c. Short Term Disability  10c. Total amounts from separate pages, if any.  10c. Total amounts from separate pages, if any.

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41.	41a.	Fill in the amount of your total nonpriority unsecured debt. If A Summary of Your Assets and Liabilities and Certain Statistical Is Schedules (Official form 6), you may refer to line 5 on that form.	formation 41s. \$	
			x .25	
	41h	25% or your total nonpriority unsecured debt. 11 U.S.C. § 707	Copy	
	410.		D)(2)(A)(I)(1) 3 here=> 5	
		Multiply line 41a by 0.25.		
25	% of y	se whether the income you have left over after subtracting all a our unsecured, nonpriority debt. s box that applies:	lowed deductions is enough to pay	
0	Line Go to	39d is less than line 41b. On the top of page 1 of this form, check Part 5.	oox 1, There is no presumption of abuse.	
	Line	39d is equal to or more than line 41b. On the top of page 1 of this implion of abuse. You may fill out Part 4 if you claim special circums	form, check box 2, There is a tances. Then go to Part 5.	
Part 4	Giv	e Details About Special Circumstances		
120-0-40-7-1	es. Fill iter Yo	to Part 5.  In the following information. All figures should reflect your average in. You may include expenses you listed in line 25.  In must give a detailed explanation of the special circumstances that cassary and reasonable. You must also give your case trustee documstments.	make the expenses or income adjustments	
	G	ive a detailed explanation of the special circumstances	Average monthly expense or income adjustment	
		As a		
	_		,	
			\$	
	-			
	_			
			s	
	. •			
Part 5:	Sig	n Below		
	By si	gning here, I declare under penalty of perjury that the information o	this statement and in any attachments is true an	d correct.
	~	en x	Monica Mcgelland	,
	^ਦ		Ionica M. McLelland	
	Sk	nature of Debtor 1	Ignature of Deblor 2	
Da	te O	0/27/2015 Date_	3/27/15	
		A/DD /YYYY	M/DD /YYYY	

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B 1D (Official Form 1, Exhibit D) (12/09)

### United States Bankruptcy Court Northern District of Illinois

In re	Eric P. McLelland Monica M. McLelland		Case No.	
		Debtor(s)	Chapter	7

## EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] \_\_\_\_

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

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B 1D (Official Form 1, Exhibit D) (12/09) - Cont.	Page 2				
☐ 4. I am not required to receive a credit cou	nseling briefing because of: [Check the applicable				
statement.] [Must be accompanied by a motion for d	etermination by the court.]				
1	(109(h)(4) as impaired by reason of mental illness or				
* * · ·	alizing and making rational decisions with respect to				
financial responsibilities.);	See a se				
1 //	109(h)(4) as physically impaired to the extent of being				
• •	in a credit counseling briefing in person, by telephone, or				
through the Internet.);	m w crount countries of confidence, or				
☐ Active military duty in a military co	ombat zone.				
☐ 5. The United States trustee or bankruptcy	administrator has determined that the credit counseling				
requirement of 11 U.S.C. § 109(h) does not apply in	this district.				
I certify under penalty of perjury that the	information provided above is true and correct.				
Signature of Debtor: /s/ Eric P. McLelland					
	Eric P. McLelland				
Date: March 31, 2015					

## Case 15-11529 Doc 1 Filed 03/31/15 Entered 03/31/15 12:51:21 Desc Main Document Page 16 of 65

B 1D (Official Form 1, Exhibit D) (12/09)

### United States Bankruptcy Court Northern District of Illinois

In re	Eric P. McLelland Monica M. McLelland		Case No.	
		Debtor(s)	Chapter	7

## EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] \_\_\_\_

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

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1D (Official Form 1, Exhibit D) (12/09) - Cont.
□ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable attement.] [Must be accompanied by a motion for determination by the court.]  □ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or
mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);
□ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, through the Internet.);
☐ Active military duty in a military combat zone.
□ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling equirement of 11 U.S.C. § 109(h) does not apply in this district.
I certify under penalty of perjury that the information provided above is true and correct.
Signature of Debtor: /s/ Monica M. McLelland
Monica M. McLelland
Date: March 31, 2015

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B6 Summary (Official Form 6 - Summary) (12/14)

# **United States Bankruptcy Court Northern District of Illinois**

In re	Eric P. McLelland,		Case No		
	Monica M. McLelland				
•		Debtors	Chapter	7	
			•		

### **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	0.00		
B - Personal Property	Yes	4	13,900.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		16,455.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	8		30,345.00	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			4,941.00
J - Current Expenditures of Individual Debtor(s)	Yes	2			4,923.00
Total Number of Sheets of ALL Schedu	ıles	22			
	T	otal Assets	13,900.00		
			Total Liabilities	46,800.00	

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B 6 Summary (Official Form 6 - Summary) (12/14)

# **United States Bankruptcy Court Northern District of Illinois**

In re	Eric P. McLelland,		Case No.		
	Monica M. McLelland				
_		Debtors	Chapter	7	

### STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	0.00

### State the following:

Average Income (from Schedule I, Line 12)	4,941.00
Average Expenses (from Schedule J, Line 22)	4,923.00
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)	8,349.17

#### State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY" column		9,419.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		30,345.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		39,764.00

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B6A (Official Form 6A) (12/07)

In re Eric P. McLelland,
Monica M. McLelland

Debtors

### **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property

Nature of Debtor's Interest in Property Husband, Wife, Joint, or Community Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption

Amount of Secured Claim

None

Sub-Total > **0.00** (Total of this page)

Total > **0.00** 

(Report also on Summary of Schedules)

**0** continuation sheets attached to the Schedule of Real Property

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B6B (Official Form 6B) (12/07)

In re	Eric P. McLelland,	Case No.
	Monica M. McLelland	

Debtors

### SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O N Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1.	Cash on hand	cash on hand	J	20.00
2.	accounts, certificates of deposit, or	checking W/USAA Federal Savings Bank 2642-7	J	20.00
	shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or	savings W/USAA Federal Savings Bank 2641-9	J	0.00
	cooperatives.	checking W/USAA Federal Savings Bank 5537-7	J	0.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X		
4.	Household goods and furnishings, including audio, video, and computer equipment.	misc. household goods & furnshings	J	1,000.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X		
6.	Wearing apparel.	misc. wearing apparel	J	500.00
7.	Furs and jewelry.	wedding rings	J	1,000.00
8.	Firearms and sports, photographic, and other hobby equipment.	AR 15/Glock/Walter Pack/Mossburg A35/Mossburg 22/410 shotgun/Boor Bow	g J	2,275.00
9.	9. Interests in insurance policies.  Name insurance company of each policy and itemize surrender or refund value of each.	Term Life Insurance W/work	н	0.00
		Beneficiary/Wife		
	retund value of each.	Term Life Insurance W/work	w	0.00
		Beneficiary/Husband		

Sub-Total > 4,815.00 (Total of this page)

**<sup>3</sup>** continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

In re	Eric P. McLelland,
	Monica M. McLelland

|--|

### Debtors

### SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
10.	Annuities. Itemize and name each issuer.	Х			
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
2.	Interests in IRA, ERISA, Keogh, or	State Pe	nsion w/work	Н	Unknown
	other pension or profit sharing plans. Give particulars.	401(K)		W	150.00
		VA Disal	pility	Н	0.00
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
4.	Interests in partnerships or joint ventures. Itemize.	X			
5.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
6.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	work co	mp. suit pending	Н	Unknown
9.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
			(T	Sub-Tota otal of this page)	al > 150.00

Sheet <u>1</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

In re	Eric P. McLelland,
	Monica M. McLelland

### Debtors

### **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

Type of Property	N O N E	Description and Location	n of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X				
<ol> <li>Patents, copyrights, and other intellectual property. Give particulars.</li> </ol>	X				
23. Licenses, franchises, and other general intangibles. Give particulars.	X				
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X				
25. Automobiles, trucks, trailers, and other vehicles and accessories.	2007 Hyundai miles)	Veracruz	(99,000	Н	7,036.00
	2001 Jeep Ch	erokee	(250,000 miles)	Н	1,899.00
26. Boats, motors, and accessories.	X				
27. Aircraft and accessories.	X				
28. Office equipment, furnishings, and supplies.	X				
29. Machinery, fixtures, equipment, and supplies used in business.	X				
30. Inventory.	X				
31. Animals.	X				
32. Crops - growing or harvested. Give particulars.	X				
33. Farming equipment and implements.	X				
34. Farm supplies, chemicals, and feed.	x				

Sheet <u>2</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

In re Eric P. McLelland,			Ca	Case No.	
_	Monica M. McLelland				
			Debtors		
		SCHEDULE	E B - PERSONAL PROPERT (Continuation Sheet)	Y	
	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption

35. Other personal property of any kind not already listed. Itemize.

| Sub-Total > 0.00 (Total of this page) | Total > 13,900.00

Sheet <u>3</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

B6C (Official Form 6C) (4/13)

**Furs and Jewelry** 

wedding rings

In re	Eric P. McLelland,	Case No.
	Monica M. McLelland	

Debtors

### SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled un (Check one box)  ☐ 11 U.S.C. §522(b)(2)  ☐ 11 U.S.C. §522(b)(3)	\$155,675. (Amount		mption that exceeds (16, and every three years thereaft or after the date of adjustment.)
Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Cash on Hand Cash on hand	735 ILCS 5/12-1001(b)	20.00	20.00
Checking, Savings, or Other Financial Accounts, Ce thecking W/USAA Federal Savings Bank 1642-7	ertificates of Deposit 735 ILCS 5/12-1001(b)	20.00	20.00
Household Goods and Furnishings nisc. household goods & furnshings	735 ILCS 5/12-1001(b)	1,000.00	1,000.00
<u>Vearing Apparel</u> nisc. wearing apparel	735 ILCS 5/12-1001(a)	500.00	500.00

Firearms and Sports, Photographic and Oth	<u>ier Hobby Equipment</u>		
AR 15/Glock/Walter Pack/Mossburg	735 ILCS 5/12-1001(b)	2,275.00	2,275.00
A35/Mossburg 22/410 shotgun/Boor Bow	`,	·	

735 ILCS 5/12-1001(b)

| Interests in Insurance Policies | Term Life Insurance W/work | 215 ILCS 5/238 | 100% | 0.00 | 735 ILCS 5/12-1001(f) | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 1

Interests in IRA, ERISA, Keogh, or Other Pension or Profit Sharing Plans							
Unknown							
150.00							

VA Disability	735 ILCS 5/12-1001(g)(2) 735 ILCS 5/12-1001(g)(3)	100% 100%	0.00
	<b>-</b>		

Other Liquidated Debts Owing Debtor Including Tax Refund
work comp. suit pending 820 ILCS 305/21 100% Unknown

Automobiles, Trucks, Trailers, and Other Vehicles
2001 Jeep Cherokee (250,000 735 ILCS 5/12-1001(c) 2,400.00 1,899.00 miles)

Total: **7,365.00 6,864.00** 

1,000.00

1,000.00

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B6D (Official Form 6D) (12/07)

In re	Eric P. McLelland,
	Monica M. McLelland

Case No.
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Debtors

### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Hu H W J C	sband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED,  NATURE OF LIEN, AND  DESCRIPTION AND VALUE  OF PROPERTY  SUBJECT TO LIEN	CONTLXGEX	UZLLQULDA	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. xxxx-xx2916			Purchase Money Security	T	ATED			
Regional Acceptance Corp. PO Box 580075 Charlotte, NC 28258-0075		J	2007 Hyundai Veracruz (99,000 miles)		D			
	┖		Value \$ 7,036.00				16,455.00	9,419.00
Account No.  Account No.			Value \$					
			Value \$					
Account No.								
			Value \$					
continuation sheets attached	Subtotal (Total of this page)						16,455.00	9,419.00
Total (Report on Summary of Schedules) 16,455.00 9,419.00						9,419.00		

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B6E (Official Form 6E) (4/13)

In re	Eric P. McLelland,	Case No.
	Monica M. McLelland	

Debtors

### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

■ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
□ <b>Domestic support obligations</b> Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible rela of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
□ Extensions of credit in an involuntary case  Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of trustee or the order for relief. 11 U.S.C. § 507(a)(3).
☐ Wages, salaries, and commissions  Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sal representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
☐ Contributions to employee benefit plans  Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of busin whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
☐ Certain farmers and fishermen  Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
☐ <b>Deposits by individuals</b> Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
☐ Taxes and certain other debts owed to governmental units  Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
☐ Commitments to maintain the capital of an insured depository institution  Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Fede Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
Claims for death or personal injury while debtor was intoxicated  Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B6F (Official Form 6F) (12/07)

In re	Eric P. McLelland,	Ca	ase No
	Monica M. McLelland		
		Debtors	

### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME,	C	Н	usband, Wife, Joint, or Community	C	U	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	C A M		N T I N G E N	L Q U I D A T		AMOUNT OF CLAIM
Account No. xxxxx6117			2009 Medical Bills	Ϊ	ΙE	1	
Adventist Bolingbrook Hospital C/O Merchants Credit Circle 223 W. Jackson Blvd. #700 Chicago, IL 60606		J	Medical Bills		D		150.00
Account No. xxxx0544		H	Medical Bills		$\dagger$	t	
Adventist Health 5101 S. Willow Springs Rd. La Grange, IL 60525		J					60.00
Account No. xx-xxxxx0077		H	2009	+	+	+	
Adventist LaGrange Memorial Hosp. C/O Merchants Credit Circle 223 W. Jackson Chicago, IL 60606		J	Medical Bills				
							150.00
Account No. xx xx xxxx/xxxx #x1918  American Family Insurance C/O Keis George LLP 19 South LaSalle Ste. 507 Chicago, IL 60603		J	2009 Judgement				7,393.00
7 continuation sheets attached		<u> </u>	(Total o	Sub f this			7,753.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Eric P. McLelland,	Case No.
	Monica M. McLelland	

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Hu H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	N G	UNLIQUIDAT	U T F	AMOUNT OF CLAIM
Account No. xxxxxxx27-01			2008	T	ΙE		
AT&T C/O AFNI 1310 Martin Luther King Dr. Bloomington, IL 61702-3517		J	Phone		D		103.00
Account No. xxxxxx1793			2013	$\square$			
AT&T Wireless C/O Convergent 10750 Hammerly Blvd. # 200 Houston, TX 77043		J	Phone				0.45.00
				Ш	L		945.00
Account No. xx-xxxx4076  ATT Midwest C/O CBCS PO Box 163250 Columbus, OH 43216-3250		J	cell phone				286.00
Account No. xxx. #xxxxxxx/xxx9061	T		2007	$\Box$			
Avon C/O Allied Data Corp. 1311 Westheimer Suite 400 Houston, TX 77077-5547		J	Supplier				175.00
Account No. xxxx-xxxx-4480			2011	П			
Bank of America PO Box 982235 El Paso, TX 79998-2235		J	Credit Card				533.00
Sheet no1 of _7 sheets attached to Schedule of	_	<u> </u>		Subt	ota	1	22125
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his J	pag	e)	2,042.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Eric P. McLelland,	Case No.
	Monica M. McLelland	

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UZLLQULDAT	D I S P U T E D	:	AMOUNT OF CLAIM
Account No. xxxx-xxxx-2067			2010	٦	T E D		Γ	
Best Buy PO Box 80045 Salinas, CA 93912-0045		J	Credit Card		Б			544.00
Account No. x7798		T	2013	$\dagger$	T	T	†	_
Centennial Counseling Center 1120 East Main Street Saint Charles, IL 60174		J	Medical Bills					130,00
Account No. xxxxxx9062	╀	$\vdash$	2007	+	$\vdash$	╀	+	
Com ED Bill Payment Center Chicago, IL 60668-0002		J	Utility Bill					578.00
Account No. xxxx xx xxx xxx6015	t	T	2010	$\dagger$	T	t	t	
Comcast PO Box 3002 Southeastern, PA 19398-3002		J	Cable Bill					583.00
Account No. xxxx-xxxx-6655	1	T	2014	$\dagger$	T	T	†	
Credit One Bank P.O. Box 60500 City Of Industry, CA 91716		J	Credit Card					358.00
Sheet no. 2 of 7 sheets attached to Schedule of				Sub			T	2,193.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ze)	ıΙ	=,

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B6F (Official Form 6F) (12/07) - Cont.

In re	Eric P. McLelland,	Case No.
	Monica M. McLelland	

CREDITOR'S NAME,	CO		sband, Wife, Joint, or Community	CONT	UNLL	D I	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	C A H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	N	LIQUIDAT	T F	AMOUNT OF CLAIM
Account No. xxx9996			2011	] <del>`</del>	T E D		
Devry, Inst. 1 Tower Lane Suite 1000 Oakbrook Terrace, IL 60181		J	online classes		D		1,630.00
Account No. xxxxxxxxxxx/xxxxrous			2010/2013 Medical Bills				
Edwards Hospital PO Box 4207 Carol Stream, IL 60122		J	Medical Bills				
					L		1,150.00
Account No. xxxx-xxxx-7379  Fingerhut 6250 Riverwood Road St. Cloud, MN 56203		J	2013 Credit Card				195.00
Account No. xxxx-xxxx-xxxx-9575			2014	П			
Fingerhut Advantage PO Box 166 Newark, NJ 07101-0166		J	Credit Card				623.00
Account No. xxxx-xxxx-2225			2012	П			
First Premier Bank Box 5519 Sioux Falls, SD 57117		J	Credit Card				Unknown
Sheet no3 of _7 sheets attached to Schedule of		•		Subt			3,598.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his j	pag	ge)	3,330.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Eric P. McLelland,	Case No.
	Monica M. McLelland	

	_			1.	1	T =	Г
CREDITOR'S NAME,	C O	ī	sband, Wife, Joint, or Community	CO	U N	DISPUT	
MAILING ADDRESS		Н	DATE CLAIM WAS INCURRED AND	N	ZLLQU.	S P	
INCLUDING ZIP CODE, AND ACCOUNT NUMBER	В	W	CONSIDERATION FOR CLAIM. IF CLAIM	Į,	Q	Ų	AMOUNT OF CLAPA
	0	C	IS SUBJECT TO SETOFF, SO STATE.	G	ľ	E	AMOUNT OF CLAIM
	R			G E N	I D A T E	D	
Account No. GRA-Tracy Bell			2012		T E D		
Haritana Osamaalina Osamaa			Medical Bills		٦	┢	
Heritage Counseling Center		٠.					
24020 W. Riverwalk Court		J					
Suite 100							
Plainfield, IL 60544-7105							
							100.00
Account No. xxxxxxx(xL)-PAS			2012/2014				
			toll violations				
Illinois Tollway							
PO Box 5544		J					
Chicago, IL 60680-5544							
• · · · · · · · · · · · · · · · · · · ·							
							215.00
Account No. xx9290	_	-	2009	+	┢		
TRECOUNT TO. AROLUU			Medical Bills				
Metro Center for Health							
901 McClintock Dr. Suite 202		J					
		٦					
Burr Ridge, IL 60527-0872							
							40.00
		_		_	L		40.00
Account No. xx-xx-xx-x420-2			2007				
			Utility Bill				
Nicor		ا ۔ ا					
Box 2020		J					
Aurora, IL 60507-2020							
		_		1	L	L	610.00
Account No. xxxx xx xx1796			2010				
			Judgement				
Niled Ya Brandon							
21459 Georgetown Drive		J					
Plainfield, IL 60544							
·							
							5,237.00
Sheet no. <b>4</b> of <b>7</b> sheets attached to Schedule of				Sub	tots	1	
Creditors Holding Unsecured Nonpriority Claims							6,202.00
Creditors Holding Unsecured Nonpriority Claims			(Total of	ınıs	pag	ge)	

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B6F (Official Form 6F) (12/07) - Cont.

In re	Eric P. McLelland,	Case No.
	Monica M. McLelland	

ODEDWOOD WALKE	С	Hu	sband, Wife, Joint, or Community	С	U	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	OD E B T O R	J H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CORFLEGER	LIQU		AMOUNT OF CLAIM
Account No. xxxx3932			2007	Т	E		
Penn Foster School 925 Oak Street Scranton, PA 18515-0001		J	online classes		D		757.00
Account No. xx1997	╁		2013				737.30
Physicians Immediate Care PO Box 544 Dept. 5390 Milwaukee, WI 53201-0544		J	Medical Bills				
							539.00
Account No. xxxx-xxxx-xxxx-5856  Pier One Imports Attn: Bankruptcy Dept. PO Box 182125 Columbus, OH 43218-2125		J	2014 Credit Card				438.00
Account No. xxxxxxx4194	╅		2013				
Presence St. Joseph PO Box 88097 Chicago, IL 60680-1097		J	Medical Bills				225.00
Account No. xxxxxxxxxxxxx/xxxxxxx7313	+	$\vdash$	2006/2009				
Provena St. Joseph 333 N. Madison Joliet, IL 60435		J	Medical Bills				332.00
Sheet no. <b>_5</b> of <b>_7</b> sheets attached to Schedule of	of	<u> </u>	1	Sub	tota	<u>l</u>	
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	ge)	2,291.00

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In re	Eric P. McLelland,	Case No.
	Monica M. McLelland	

	С	Hus	sband, Wife, Joint, or Community	Tc	Ιυ	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	001	H & J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONFLEGEN	Q U	I S P U T E D	AMOUNT OF CLAIN
Account No. xxxxx7335			2013	7	E		
Sprint PO Box 8077 London, KY 40742		J	cell phone		D		1,049.00
Account No. Monica McLelland	╁		2013	+	$\vdash$	┢	<u> </u>
Summit Mental Health 3033W. Jefferson St. Suite107 Joliet, IL 60435-5252		J	Medical Bills				
				$\perp$			50.00
Account No. xxxxx4315  T-Mobile PO Box 2400 Young America, MN 55553-2400	-	J	2007 cell phone				148.00
Account No. xxxx6679	Ħ		2013/2014	+			
Target Credit Card PO Box 30171 Tampa, FL 33630-3171		J	Credit Card				451.00
Account No. xxxxx3101	$\vdash$		2012	+	$\vdash$	$\vdash$	401100
Target Credit Card PO Box 59317 Minneapolis, MN 55459	-	J	Credit Card				514.00
Sheet no. 6 of 7 sheets attached to Schedule of				Sub	tota	ıl	221222
Creditors Holding Unsecured Nonpriority Claims			(Total of				2,212.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Eric P. McLelland,	Case No.
	Monica M. McLelland	

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu: H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	COXFLXGEX	L Q	T E	I S P U T E	AMOUNT OF CLAIM
Account No. xxx1771	lacksquare		2012 Lawn Care	ľ	T E D			
Tee Time Lawn Care 23736 W. 119th Street Plainfield, IL 60585		J						185.00
Account No. xxxx-xxxx-xxxx-1873	╁	$\vdash$	2014	$\dagger$	$\vdash$	t	$\dagger$	
The Buckle PO Box 182125 Columbus, OH 43218-2125		J	Credit Card					
				L				355.00
Account No. xxxxx-xxxxxx9013  The Neat Company 1601 Market Street 3500 Philadelphia, PA 19103		J	2013/2014 Supplier					
								300.00
Account No. xxx x9001  University of Sedona 2675 West State Route 89-A #465 Sedona, AZ 86336		J	2014 On line classes					
ocaona, Az ococo								1,125.00
Account No. xxxxx2738  Verizon Wireless PO Box 25505 Lehigh Valley, PA 18002-5505		J	2013 cell phone					2,089.00
Sheet no7 of _7 sheets attached to Schedule of				Sub			†	4,054.00
Creditors Holding Unsecured Nonpriority Claims			(Total of				)	
			(Report on Summary of S		Tota dule		)	30,345.00

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B6G (Official Form 6G) (12/07)

In re	Eric P. McLelland,	Case No
	Monica M. McLelland	

Debtors

### SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

Rizzo Group

Lease for rent/\$1250. per month. months

Behind 4

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B6H (Official Form 6H) (12/07)

In re	Eric P. McLelland,	Case No.
	Monica M. McI elland	

Debtors

### **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

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	n this information to identify your ca			
Deb	tor 1 Eric P. McLe			
	tor 2 Monica M. M	lcLelland		
	ed States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS	
Cas	e number			Check if this is:
(If kn	own)			☐ An amended filing
				A supplement showing post-petition chapter 13 income as of the following date:
<u>Of</u>	ficial Form B 6I			MM / DD/ YYYY
Be a supp spou attac	olying correct information. If you use. If you are separated and you has a separate sheet to this form.	sible. If two married peo are married and not fili or spouse is not filing w	ng jointly, and your spouse is livin ith you, do not include informatior	nd Debtor 2), both are equally responsible for g with you, include information about your about your spouse. If more space is needed,
Be a supp spou attac	s complete and accurate as poss olying correct information. If you use. If you are separated and you what has be a separate sheet to this form.	sible. If two married peo are married and not fili or spouse is not filing w	ng jointly, and your spouse is livin ith you, do not include informatior	
Be a supp spou attac	s complete and accurate as possiblying correct information. If you ise. If you are separated and you has exparate sheet to this form.  Describe Employment  Fill in your employment	sible. If two married peo are married and not fili Ir spouse is not filing w On the top of any additi	ng jointly, and your spouse is livin ith you, do not include information onal pages, write your name and o	nd Debtor 2), both are equally responsible for g with you, include information about your about your spouse. If more space is needed, ease number (if known). Answer every question
Be a supp spou attac	s complete and accurate as possiblying correct information. If you use. If you are separated and you has separate sheet to this form. It is the property of th	sible. If two married peo are married and not fili or spouse is not filing w	ng jointly, and your spouse is livin ith you, do not include informatior onal pages, write your name and o	nd Debtor 2), both are equally responsible for g with you, include information about your about your spouse. If more space is needed, asse number (if known). Answer every question Debtor 2 or non-filing spouse
Be a supp spou attac	s complete and accurate as possolying correct information. If you ise. If you are separated and you that a separate sheet to this form. On the separate sheet to this form. The separate sheet to this sheet to	sible. If two married peo are married and not fili Ir spouse is not filing w On the top of any additi	ng jointly, and your spouse is living the you, do not include information onal pages, write your name and of the pages.  Debtor 1  Employed	nd Debtor 2), both are equally responsible for g with you, include information about your about your spouse. If more space is needed, ease number (if known). Answer every question.  Debtor 2 or non-filing spouse
Be a supp spou attac	s complete and accurate as possiblying correct information. If you use. If you are separated and you has separate sheet to this form. It is the property of th	sible. If two married peo are married and not fili ir spouse is not filing w On the top of any additi	ng jointly, and your spouse is living ith you, do not include information onal pages, write your name and complete the pages.  Debtor 1  Employed  Not employed	nd Debtor 2), both are equally responsible for g with you, include information about your about your spouse. If more space is needed, ease number (if known). Answer every question Debtor 2 or non-filing spouse
Be a supp spou attac	s complete and accurate as possiblying correct information. If you ise. If you are separated and you has a separate sheet to this form. It is to be	sible. If two married peo are married and not filin ir spouse is not filing w On the top of any additi Employment status	Debtor 1  Employed  Correctional Officer  ILL. Dept. of	nd Debtor 2), both are equally responsible for g with you, include information about your about your spouse. If more space is needed, ease number (if known). Answer every question.  Debtor 2 or non-filing spouse

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 5,743.00 \$ 0.00

3. Estimate and list monthly overtime pay.

4. Calculate gross Income. Add line 2 + line 3.

Official Form B 6I Schedule I: Your Income page 1

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Eric P. McLelland

Debtor 1 Monica M. McLelland Debtor 2 Case number (if known) For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here 5.743.00 0.00 List all payroll deductions: Tax, Medicare, and Social Security deductions 5a. 5a. 1,178.00 0.00 5b. Mandatory contributions for retirement plans 5b. 0.00 0.00 5c. Voluntary contributions for retirement plans 5c. \$ 0.00 \$ 0.00 Required repayments of retirement fund loans 5d. 5d. 0.00 0.00 5e Insurance 5e. \$ 278.00 0.00 5f. **Domestic support obligations** 5f. 0.00 0.00 5g. **Union dues** 5g. 76.00 0.00 Other deductions. Specify: 5h.+ 0.00 0.00 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. 1.532.00 0.00 Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. 7. \$ 4.211.00 0.00 List all other income regularly received: 8. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 0.00 0.00 8b. Interest and dividends 8b. 0.00 0.00 Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. 0.00 600.00 8d. Unemployment compensation 8d. 0.00 0.00 **Social Security** 8e. 8e. 0.00 0.00 Other government assistance that you regularly receive 8f. Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8f. Specify: 0.00 0.00 8g. 8g. Pension or retirement income 130.00 \$ 0.00 Other monthly income. Specify: 8h.+ 8h. 0.00 \$ 0.00 Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. 130.00 600.00 10. Calculate monthly income. Add line 7 + line 9. 10. 4.341.00 600.00 4.941.00 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it 4,941.00 12. applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? No. Yes. Explain:

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				•		
Fill	in this informa	ation to identify your case:				
Deb	otor 1	Eric P. McLelland		Che	eck if this is:	
					An amended filing	
	otor 2	Monica M. McLelland				wing post-petition chapter
(Sp	ouse, if filing)				13 expenses as of	the following date:
Unit	ted States Bank	ruptcy Court for the: NORTHERN DISTRICT OF ILLIN	IOIS		MM / DD / YYYY	
Cas	se number				A separate filing fo	r Debtor 2 because Debtor
(If k	nown)	<del>-</del>			2 maintains a sepa	rate household
	fficial Ec	orm B 6J				
		J: Your Expenses	en:	41		12/13
info	ormation. If m	and accurate as possible. If two married people and space is needed, attach another sheet to this not her every question.	form. On the top of	any addit	ional pages, write y	your name and case
Par		ribe Your Household				
1.	Is this a joi					
	□ No. Go to					
	■ Yes. <b>Doe</b>	es Debtor 2 live in a separate household?				
		No				
	□ Y	es. Debtor 2 must file a separate Schedule J.				
2.	Do you hav	re dependents? □ No				
	Do not list D Debtor 2.	Debtor 1 and Yes. Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state	the the			_	□ No
	dependents	'names.	Daughter		8 years	Yes
			Son		11 voore	□ No
			3011		11 years	■ Yes □ No
			Daughter		13 years	= ::-
			Daugnter		15 years	■ Yes □ No
			Son		14 years	■ Yes
3.	Do your ex	penses include				<b>—</b> 165
		of people other than				
	yourself an	d your dependents?				
Par	t 2: Estim	nate Your Ongoing Monthly Expenses				
		xpenses as of your bankruptcy filing date unless y				
	olicable date.	a date after the bankruptcy is filed. If this is a supp	nementai Schedule	J, check	the box at the top o	or the form and fill in the
		es paid for with non-cash government assistance in the contract and have included it on Schedule I: '				
	ficial Form 6				Your exp	enses
4.		or home ownership expenses for your residence. I	nclude first mortgage	e 4.	\$	1,250.00
		ded in line 4:				
				4-	Ф	0.00
		estate taxes erty, homeowner's, or renter's insurance		4a. 4b.		0.00
	•	e maintenance, repair, and upkeep expenses		4b. 4c.	·	0.00 100.00
		eowner's association or condominium dues		4d.	· ———	0.00
5	Additional	mortgage payments for your residence, such as ho	me equity loans	5	\$	0.00

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			icLelland M. McLelland	Casa num	ber (if known)	
שפר	, (O) Z <u> V </u>	onica N	vi. Ivice-challu	Case num	inei (ii kiiOMII)	
6.	Utilities:	:				
			heat, natural gas	6a.	\$	350.00
	6b. W	ater, sew	wer, garbage collection	6b.	\$	50.00
	6c. Te	elephone	e, cell phone, Internet, satellite, and cable services	6c.	\$	395.00
	6d. Ot	ther. Spe	ecify:	6d.	\$	0.00
7.	Food an	nd house	ekeeping supplies	7.	\$	1,500.00
8.	Childcar	re and c	hildren's education costs	8.	\$	150.00
9.	Clothing	g, laundr	ry, and dry cleaning	9.	\$	200.00
10.	Persona	al care p	roducts and services	10.	\$	100.00
11.	Medical	and der	ntal expenses	11.	\$	237.00
12.			Include gas, maintenance, bus or train fare.	40	Φ.	300.00
4.0			ar payments.	12.		
			clubs, recreation, newspapers, magazines, and books	13.		0.00
			ributions and religious donations	14.	\$	50.00
15.	Insurance		surance deducted from your pay or included in lines 4 or 20.			
		fe insura		15a.	\$	0.00
		ealth insu		15b.	·	0.00
		ehicle ins		15c.	·	91.00
			rance. Specify:	15d.		0.00
16			clude taxes deducted from your pay or included in lines 4 or 20.		Ψ	0.00
10.	Specify:		clude taxes deducted from your pay or included in lines 4 or 20.	16.	\$	0.00
17.			ease payments:		<u> </u>	0.00
			ents for Vehicle 1	17a.	\$	0.00
	17b. Ca	ar payme	ents for Vehicle 2	17b.	\$	0.00
	17c. Ot	ther. Spe	ecify:	17c.	\$	0.00
	17d. Ot			17d.	·	0.00
18.		•	of alimony, maintenance, and support that you did not report	as		
			your pay on line 5, Schedule I, Your Income (Official Form 6I).		\$	0.00
19.	Other pa	ayments	s you make to support others who do not live with you.		\$	0.00
	Specify:			19.		
20.			erty expenses not included in lines 4 or 5 of this form or on S			
			s on other property	20a.		0.00
		eal estate		20b.	·	0.00
			nomeowner's, or renter's insurance	20c.		0.00
			nce, repair, and upkeep expenses	20d.	·	0.00
			er's association or condominium dues	20e.	· —	0.00
21.	Other: S	Specify:	car maintenance	21.	+\$	150.00
22.	Your mo	onthly ex	xpenses. Add lines 4 through 21.	22.	\$	4,923.00
			r monthly expenses.		· —	
23.			monthly net income.			
	23a. Co	opy line 1	12 (your combined monthly income) from Schedule I.	23a.	\$	4,941.00
	23b. Co	opy your	monthly expenses from line 22 above.	23b.	-\$	4,923.00
			our monthly expenses from your monthly income.		Φ.	49.00
	Th	ne result	is your monthly net income.	23c.	\$	18.00
24.	For examp	ple, do yo	an increase or decrease in your expenses within the year after ou expect to finish paying for your car loan within the year or do you expect yearns of your mortgage?			se or decrease because of a
	■ No.					
	☐ Yes. Explain:					

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B6 Declaration (Official Form 6 - Declaration). (12/07)

# **United States Bankruptcy Court Northern District of Illinois**

In re	Monica M. McLelland		Case No.	
		Debtor(s)	Chapter	7

## DECLARATION CONCERNING DEBTOR'S SCHEDULES

## DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

	I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting sheets, and that they are true and correct to the best of my knowledge, information, and belief.				
Date	March 31, 2015	Signature	/s/ Eric P. McLelland		

Debtor

Date March 31, 2015 Signature /s/ Monica M. McLelland Monica M. McLelland

Joint Debtor

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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B7 (Official Form 7) (04/13)

## United States Bankruptcy Court Northern District of Illinois

In re	Eric P. McLelland Monica M. McLelland		Case No.		
		Debtor(s)	Chapter	7	
		Debtor(s)	Chapter	7	

# STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

#### 1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
\$10,022.00	2015 YTD: Debtor Illinois Dept. of Corrections
\$74,306.00	2014: Debtor Illinois Dept. of Corrections
\$52,000.00	2013: Debtor Illinois Dept. of Corrections
\$3,451.00	2015 YTD: Joint Dbt Hintzsche Fertilizer
\$6,744.00	2014: Joint Dbt Hintzsche Fertilizer
\$16,000.00	2013: Joint Dbt work

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B7 (Official Form 7) (04/13)

### 2. Income other than from employment or operation of business

None 

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
\$266.00	2015 YTD: Debtor VA Disability
\$1,598.00	2014 YTD:Debtor VA Disability
\$1,598.00	2013:Debtor VA Disability
\$1,200.00	2015 YTD: Joint Dbt child support
\$7,200.00	2014: Joint Dbt child support

#### 3. Payments to creditors

\$7,200.00

None

Complete a. or b., as appropriate, and c.

Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF **PAYMENTS** 

2013: Joint Dbt child support

AMOUNT PAID

AMOUNT STILL **OWING** 

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225\*. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

> AMOUNT DATES OF PAID OR PAYMENTS/ VALUE OF **TRANSFERS TRANSFERS**

NAME AND ADDRESS OF CREDITOR

None

All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL **OWING** 

AMOUNT STILL

**OWING** 

#### 4. Suits and administrative proceedings, executions, garnishments and attachments

None 

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER McLelland v VA

NATURE OF **PROCEEDING** workers comp

COURT OR AGENCY AND LOCATION **Industrial commission** 

STATUS OR DISPOSITION pending

 $^st$  Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B7 (Official Form 7) (04/13)

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

. ...,

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

#### 5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER

DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

#### 6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS

OF CUSTODIAN

NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER

DESCRIPTION AND VALUE OF PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

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### 9. Payments related to debt counseling or bankruptcy

None 

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

Geraci Law Firm

DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

Law Offices of Covey Law Firm, PC 232 S. Batavia Ave. Batavia, IL 60510

10/2014 \$1500.

**DebtorCC** 10/24/2014

#### 10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE. RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

\$9.95

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled None trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

IN PROPERTY

#### 11. Closed financial accounts

None П

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

**Bank of America** 

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER. AND AMOUNT OF FINAL BALANCE checking account **7ero** 

**Balance** 

AMOUNT AND DATE OF SALE OR CLOSING

Zero

### 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY

NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS DATE OF TRANSFER OR SURRENDER, IF ANY

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#### 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

#### 14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

#### 15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

#### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

#### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL LINIT

DATE OF

ENVIRONMENTAL

LAW

GOVERNMENTAL UNIT NOTICE

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS

NAME AND ADDRESS OF

DATE OF

**ENVIRONMENTAL** 

GOVERNMENTAL UNIT NOTICE LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which

the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

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NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

#### 18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS

BEGINNING AND NATURE OF BUSINESS ENDING DATES

None b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME

NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

#### 19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

### NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME ADDRESS

DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME ADDRESS

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

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#### 20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY

(Specify cost, market or other basis)

b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY

DATE OF INVENTORY

NAME AND ADDRESSES OF CUSTODIAN OF INVENTOR'
RECORDS

#### 21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

#### 22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME

None

**ADDRESS** 

DATE OF WITHDRAWAL

b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

#### 23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

#### 24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

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#### 25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

\* \* \* \* \* \*

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date March 31, 2015

Signature /s/ Eric P. McLelland
Debtor

Date March 31, 2015

Signature /s/ Monica M. McLelland
Monica M. McLelland
Joint Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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B8 (Form 8) (12/08)

# United States Bankruptcy Court Northern District of Illinois

In re	Eric P. McLelland Monica M. McLelland			Case No.	
			Debtor(s)	Chapter	7
PART	CHAPTER 7  A - Debts secured by property property of the estate. Attac		must be fully con		
Proper	rty No. 1	n uconconar puges ir ne			
	tor's Name: onal Acceptance Corp.		Describe Prop 2007 Hyundai	erty Securing Debt Veracruz	: (99,000 miles)
•	rty will be (check one):  Surrendered	☐ Retained			
	ining the property, I intend to (ch I Redeem the property I Reaffirm the debt I Other. Explain		oid lien using 11	U.S.C. § 522(f)).	
	rty is (check one): I Claimed as Exempt		■ Not claimed	as exempt	
	<b>B</b> - Personal property subject to additional pages if necessary.)	unexpired leases. (All thre	ee columns of Part	B must be complete	ed for each unexpired lease.
Proper	rty No. 1				
Lesso: -NONI	r's Name: E-	Describe Leased Pr	roperty:	Lease will be U.S.C. § 365 ☐ YES	e Assumed pursuant to 11 (p)(2):
person	are under penalty of perjury tha nal property subject to an unexp March 31, 2015		/s/ Eric P. McLe Eric P. McLellar Debtor	lland	estate securing a debt and/or
Date .	March 31, 2015	Signature	/s/ Monica M. M Monica M. McLe Joint Debtor		

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# **United States Bankruptcy Court** Northern District of Illinois

In re	Eric P. McLelland Monica M. McLelland		Case No.		
	Monica III. McZenana	Debtor(s)	Chapter	7	
	DISCLOSURE OF COM	PENSATION OF ATTOR	RNEY FOR DE	BTOR(S)	
1	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rul paid to me within one year before the filing of the p behalf of the debtor(s) in contemplation of or in con	e 2016(b), I certify that I am the atto etition in bankruptcy, or agreed to be	rney for the above-n	amed debtor and that comp	
	For legal services, I have agreed to accept		\$	1,500.00	
	Prior to the filing of this statement I have recei	ved	\$	1,500.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed of	compensation with any other person	unless they are mem	pers and associates of my la	aw firm.
	☐ I have agreed to share the above-disclosed compopy of the agreement, together with a list of the				m. A
5.	In return for the above-disclosed fee, I have agreed	to render legal service for all aspects	s of the bankruptcy c	ase, including:	
1	<ul> <li>a. Analysis of the debtor's financial situation, and r</li> <li>b. Preparation and filing of any petition, schedules</li> <li>c. Representation of the debtor at the meeting of cr</li> <li>d. [Other provisions as needed]</li> </ul>	, statement of affairs and plan which	may be required;		7;
<b>5.</b> ]	By agreement with the debtor(s), the above-disclose Negotiation or filing of any reaffirma		service:		
		CERTIFICATION			
	I certify that the foregoing is a complete statement coankruptcy proceeding.	of any agreement or arrangement for	payment to me for re	epresentation of the debtor	s) in
Dated	d: March 31, 2015	/s/ Bradley S. Cov			
		Bradley S. Covey Law Offices of Br 232 S. Batavia Av Batavia, IL 60510 630-879-9559 Fa	6208786 adley S. Covey, P e. x: 630-879-9394	.c.	
		bradley.covey@g	mail.com		

# Advance Payment Retainer Agreement

of Bradley S. Covey, P.C.., hereinafter referred to as "Attorney", to render legal services in connection with filing a Chapter 7 bankruptcy for me, and hereby empower and authorize Attorney to do all things, in their sole discretion, reasonably necessary to bring the matter to a successful conclusion. Client acknowledges that the following advance payment retainer agreement has been fully explained, and Client agrees to pay said fees and costs in consideration of legal services rendered or to be rendered.

This retainer agreement is an advance payment retainer agreement. The funds Client has agreed to pay Attorney shall be deposited in the Law Offices of Bradley S. Covey, P.C. General Operating Account and ownership of said funds shall pass to the Law Offices of Bradley S. Covey, P.C. immediately upon payment.

As our client, it is your option to have your money placed into a security retainer. The choice of the type of retainer to be used is yours alone.

The special purpose for this advance payment retainer is to allow Client to retain Attorney to represent him against creditors. Client understands that it is advantageous to treat this retainer as an advance payment retainer in that it protects the funds paid to Attorney from the claims of his creditors. If this retainer were treated as a security retainer said funds would remain the property of Client and therefore subject to the claims of the Client's creditors.

It is understood that the above referenced flat fee is payment for services rendered and services to be performed. The services include: review of financial status; review of various documents related to debts and obligations; counseling as to various types of bankruptcy chapters; effect of bankruptcy on future ability to obtain new credit; effect of reaffirmation (but not the preparation of or filing reaffirmation agreements), redemption, avoiding liens and surrendering property; specific advice regarding how to avoid bankruptcy and alternatives to bankruptcy; complete drafting of all required bankruptcy documents; revision and redraft of final bankruptcy documents; attending creditors' meeting, and closing file.

This Advanced Payment Agreement does not include reaffirmation agreements. Attorney is not responsible for obtaining, preparing or filing any reaffirmation agreement.

Client agrees that additional attorney's fees will be due should additional representation become necessary, including, but not limited to any 2004 examination, any adversary proceedings, objections to discharge, or any other action, hearing or representation that is not specified in the preceding paragraph of this agreement. Said additional representation shall be covered by a separate legal services agreement and will require an additional retainer.

The Client agrees that should he decide not to file bankruptcy or decide not to continue using Attorney's services. Attorney may charge against any retainer paid the amount of \$350.00 per hour for all services rendered to date, plus actual costs incurred.

Client agrees to cooperate in the preparation of the bankruptcy case, to appear for the creditors' meeting, depositions and court appearances and to comply with all reasonable requests made in preparation of this bankruptcy case. Failure to cooperate may result in Court-imposed sanctions and Attorney's withdrawal from the case.

Client understands that he shall receive copies of all documents related to his file. Client should retain those documents as his copy of his file. Should Client require additional copies of the Attorney's file the Client understands that he will be charged for those copies.

Client understands that his file shall be kept no more than five years. Should Client require copies of any documents or the return of original documents provided to Attorney he must request those copies in writing before the expiration of that five-year period.

It is agreed that upon the event of any default or breach of any kind under this agreement by Client, Attorney reserves the right to withdraw as counsel of record for Client. It is further agreed that Client shall not have any recourse or claim against Attorney for damages following the withdrawal of Attorney as Client's counsel.

In some cases it may be necessary to hire an attorney outside Attorney's firm. This attorney will be paid out of the retainer paid to Attorney. Client expressly consents to the hiring of an outside attorney to cover court dates as needed.

Client understands that it is the Client's responsibility to provide Attorney with a complete and accurate list of creditors and other information requested on Attorney's Debt Listing Sheet and Questionnaire. The Client further understands that any debts not listed in his bankruptcy schedules may not be discharged. If Client fails to provide Attorney with all information necessary to prepare the necessary documents and said failure necessates the amending of the schedules or Statement of Financial Affairs, Client agrees to pay an additional \$100.00 to cover the fees and costs of said amendment.

The fees charged in connection with this bankruptcy and for bankruptcy issues only. They do not included resolution of any matters involving credit information.

This constitutes the entire agreement between the Attorney and Clients regarding attorneys' fees and/or services provided in the engagement, the parties agree to resolve that dispute through mediation, followed by arbitration before any suit is filed.

Attorney is a debt relief agency and helps people file for relief under the Bankruptcy Code.

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Special Financial Management Course Notice

Client MUST provide Attorney with a copy of Client's Certificate of Completion of Financial Management Course. If Client fails to ensure that Attorney has received and filed the required Certificate of Completion of Financial Management Course, the Client shall be responsible for payment of the case reopening fee and additional Attorney's fees of \$600.00 for filing a motion to reopen the case and file said certificate. Attorney is under no obligation to file any motion to reopen Client's case until the above referenced fees and costs are paid.

Client

Client

By Client's signature below, Client acknowledges understanding the terms of this agreement and agrees to abide by its provisions. Client has received a copy of this agreement for his records no later than five business days after the first date on which the Attorney provided any bankruptcy assistance services to client.

Client

Client

Attorney

# UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

# NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

# 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

## 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

#### Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

# <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the

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Form B 201A, Notice to Consumer Debtor(s)

Page 2

Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

### Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

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B 201B (Form 201B) (12/09)

Printed Name(s) of Debtor(s)

Case No. (if known)

# **United States Bankruptcy Court** Northern District of Illinois

In re	Eric P. McLelland Monica M. McLelland		Case No.				
		Debtor(s)	Chapter	7			
CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE							
	$\mathbf{c}$	ertification of Debtor					
Code.	I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code.						
	McLelland a M. McLelland	${ m X}$ /s/ Eric P. McLelland		March 31, 2015			

Signature of Debtor

 $\chi$  /s/ Monica M. McLelland

Signature of Joint Debtor (if any)

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

Date

Date

March 31, 2015

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# **United States Bankruptcy Court** Northern District of Illinois

In re	Monica M. McLelland		Case No.	
		Debtor(s)	Chapter	7
	VF	ERIFICATION OF CREDITOR M	IATRIX	
		Number of	Creditors:	59
	The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.			
Date:	March 31, 2015	/s/ Eric P. McLelland Eric P. McLelland Signature of Debtor		
Date:	March 31, 2015	/s/ Monica M. McLelland Monica M. McLelland Signature of Debtor		

Account Control Tech.

Adventist Bolingbrook Hospital C/O Merchants Credit Circle 223 W. Jackson Blvd. #700 Chicago, IL 60606

Adventist Health 5101 S. Willow Springs Rd. La Grange, IL 60525

Adventist LaGrange Memorial Hosp. C/O Merchants Credit Circle 223 W. Jackson Chicago, IL 60606

Allied Interstate PO Box 361474 Columbus, OH 43236-1474

American Family Insurance C/O Keis George LLP 19 South LaSalle Ste. 507 Chicago, IL 60603

AT&T C/O AFNI 1310 Martin Luther King Dr. Bloomington, IL 61702-3517

AT&T Wireless C/O Convergent 10750 Hammerly Blvd. # 200 Houston, TX 77043

ATT Midwest C/O CBCS PO Box 163250 Columbus, OH 43216-3250

Avon C/O Allied Data Corp. 1311 Westheimer Suite 400 Houston, TX 77077-5547 Bank of America PO Box 982235 El Paso, TX 79998-2235

Best Buy PO Box 80045 Salinas, CA 93912-0045

CCB Credit Services Box 272 Springfield, IL 62705

Centennial Counseling Center 1120 East Main Street Saint Charles, IL 60174

Com ED Bill Payment Center Chicago, IL 60668-0002

Comcast PO Box 3002 Southeastern, PA 19398-3002

Convergent Collections PO Box 9004 Renton, WA 98057-9004

Credit One Bank
P.O. Box 60500
City Of Industry, CA 91716

Creditors Collection Bureau, Inc. PO Box 63 Kankakee, IL 60901-0063

Creditors Protection Service, Inc. 308 West State Street PO Box 485 Rockford, IL 61110-0615

Devry, Inst. 1 Tower Lane Suite 1000 Oakbrook Terrace, IL 60181 Edwards Hospital PO Box 4207 Carol Stream, IL 60122

Enhanced Recovery PO Box 57610 Jacksonville, FL 32241

Fingerhut 6250 Riverwood Road St. Cloud, MN 56203

Fingerhut Advantage PO Box 166 Newark, NJ 07101-0166

First Premier Bank Box 5519 Sioux Falls, SD 57117

Harris & Harris LTD 600 West Jackson Blvd. Suite 400 Chicago, IL 60661

Heritage Counseling Center 24020 W. Riverwalk Court Suite 100 Plainfield, IL 60544-7105

Illinois Tollway PO Box 5544 Chicago, IL 60680-5544

JCC Christensen PO Box 519 Sauk Rapids, MN 56379

Metro Center for Health 901 McClintock Dr. Suite 202 Burr Ridge, IL 60527-0872

MIdland Credit 8875 Aero Drive San Diego, CA 92123 Miramed Revenue Group, LLC 991 Oak Creed Drive Lombard, IL 60148

MQC Collection Services PO Box 140250 Toledo, OH 43614

National Asset Management Inc. PO Box 291 Steubenville, OH 43952

NCO Financial Systems POB 15630 Wilmington, DE 19850

Nicor Box 2020 Aurora, IL 60507-2020

Niled Ya Brandon 21459 Georgetown Drive Plainfield, IL 60544

Pellettieri 991 Oak Creek Drive Lombard, IL 60148-6408

Penn Foster School 925 Oak Street Scranton, PA 18515-0001

Physicians Immediate Care PO Box 544 Dept. 5390 Milwaukee, WI 53201-0544

Pier One Imports Attn: Bankruptcy Dept. PO Box 182125 Columbus, OH 43218-2125

Portfolio Recovery 140 Corporate Blvd. Norfolk, VA 23502 Presence St. Joseph PO Box 88097 Chicago, IL 60680-1097

Provena St. Joseph 333 N. Madison Joliet, IL 60435

Regional Acceptance Corp. PO Box 580075 Charlotte, NC 28258-0075

Rizzo Group

Sprint PO Box 8077 London, KY 40742

Summit Mental Health 3033W. Jefferson St. Suite107 Joliet, IL 60435-5252

T-Mobile PO Box 2400 Young America, MN 55553-2400

Target Credit Card PO Box 30171 Tampa, FL 33630-3171

Target Credit Card PO Box 59317 Minneapolis, MN 55459

Tee Time Lawn Care 23736 W. 119th Street Plainfield, IL 60585

The Buckle PO Box 182125 Columbus, OH 43218-2125 The Neat Company 1601 Market Street 3500 Philadelphia, PA 19103

Transworld Systems 507 Prudential Road Horsham, PA 19044

University of Sedona 2675 West State Route 89-A #465 Sedona, AZ 86336

USBC Corp. PO Box 75 Archbald, PA 18403

Verizon Wireless PO Box 25505 Lehigh Valley, PA 18002-5505